

NM OIL CONSERVATION

ARTESIA DISTRICT

JAN 06 2016

Form 3160-4
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

RECEIVED

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name	
b. Type of Completion <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input checked="" type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		7. Unit or CA Agreement Name and No.	
2. Name of Operator COG OPERATING LLC		8. Lease Name and Well No. JENKINS B FEDERAL 12	
Contact: KANICIA CASTILLO E-Mail: kcastillo@concho.com		9. API Well No. 30-015-31559	
3. Address ONE CONCHO CENTER 600 W ILLINOIS AVE MIDLAND, TX 79701		3a. Phone No. (include area code) Ph: 432-685-4332	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface 2310FNL 2310FWL At top prod interval reported below 2310FNL 2310FWL At total depth 2310FNL 2310FWL		10. Field and Pool, or Exploratory GRAYBURG JACKSON	
14. Date Spudded 02/21/2001		15. Date T.D. Reached 03/01/2001	
16. Date Completed <input type="checkbox"/> D & A <input type="checkbox"/> Ready to Prod. 12/02/2014		17. Elevations (DF, KB, RT, GL)* 3640 GL	
18. Total Depth: MD 4900 TVD		19. Plug Back T.D.: MD 4220 TVD	
20. Depth Bridge Plug Set: MD 4220 TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) N/A	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis)			

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375	48.0		427		450			
12.250	8.625	24.0		1098		600			
7.875	5.500	17.0		4866		1050			

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	4149							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) SAN ANDRES	3100	3975	3100 TO 3975	0.600	162	OPEN
B)			4321 TO 4748	0.410	96	CLOSED CIBP @ 4180 W/40' CLA
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
3100 TO 3975	383,851 GAL GEL, 456,823 16/30 BRADY SAND, 99,710# 16/30 SLC, 3662 GALS 7.5% HCL ACID.

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
12/07/2014	12/15/2014	24	→	83.0	140.0	324.0	35.3	0.60	ELECTRIC PUMPING UNIT
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→					POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #288749 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

AB

28b. Production - Interval C									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

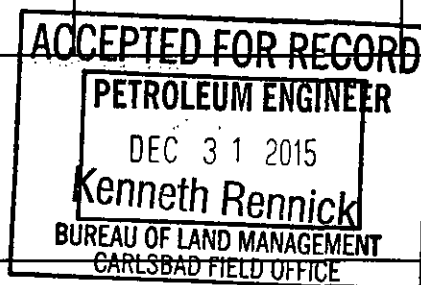
28c. Production - Interval D									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
CAPTURED

30. Summary of Porous Zones (Include Aquifers):
Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
QUEEN	2070				
SAN ANDRES	2821				
GLORIETA	4254				
YESO	4318				

32. Additional remarks (include plugging procedure):



33. Circle enclosed attachments:
- | | | | |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.) | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis | 7. Other: | |

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

Electronic Submission #288749 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH HAM on 04/21/2015 ()

Name (please print) KANICIA CASTILLO Title PREPARER

Signature (Electronic Submission) Date 01/21/2015

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ****

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-015-3559	² Pool Code 28509	³ Pool Name Grayburg Jackson;SR-Q-G-SA
⁴ Property Code 302510	⁵ Property Name Jenkins B Federal	
⁷ OGRID No. 229137	⁸ Operator Name COG Operating LLC	⁶ Well Number 12 ⁹ Elevation 3640

¹⁰ Surface Location

UL or lot no. F	Section 20	Township 17S	Range 30E	Lot Idn	Feet from the 2310	North/South line North	Feet from the 2310	East/West line West	County Eddy
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Dedicated Acres 40	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.						

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

	¹⁷ OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division</i> <div style="display: flex; justify-content: space-between;"> <div> </div> <div>6/5/14</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Signature</div> <div>Date</div> </div> <div> Kanicia Castillo Printed Name kcastillo@concho.com E-mail Address </div>	
	¹⁸ SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i>	
	Date of Survey Signature and Seal of Professional Surveyor:	
	Certificate Number	